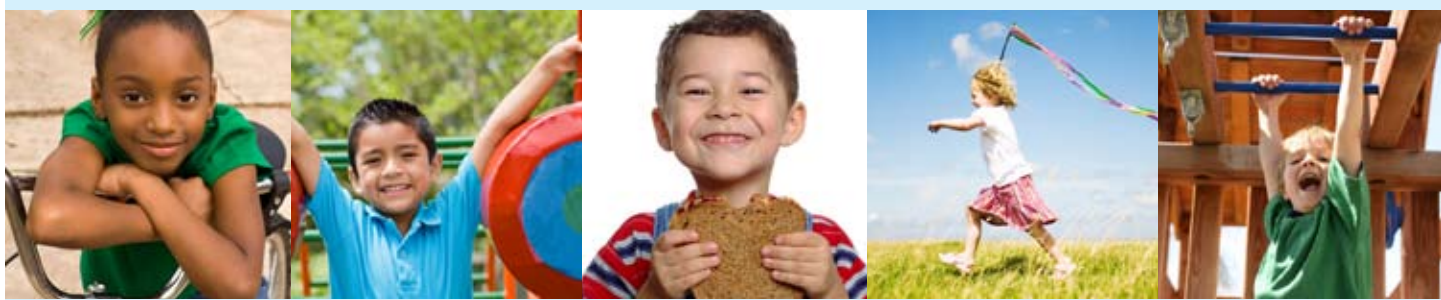


**MISSISSIPPI PREVENTING **OBESITY** WITH  
EVERY RESOURCE (POWER) PROJECT**

**An Environmental Scan of Childhood  
Obesity Efforts in Mississippi**

NOVEMBER 2007



Office of Preventive Health  
Mississippi State  
Department of Health

Office of the Governor  
State of Mississippi

Office of Healthy Schools  
Mississippi Department of  
Education

# ACKNOWLEDGEMENTS

Special thanks to the many key informants who gave so generously of their time and wisdom to contribute to this environmental scan. This environmental scan could not have been possible without their participation. Their contact information is found in Appendix C. We also thank those individuals who provided important leads on identifying other key informants and providing insight, recommendations and access to reports.

This environmental scan was developed by Developing Resources for Education in America, Inc. (DREAM), a nonprofit organization based in Jackson, MS. DREAM would like to thank the following team for their assistance in producing this scan.

**Dr. Victor D. Sutton**, Office of Preventive Health, Mississippi Department of Health — Project Coordinator

**Glenda Crump**, DREAM, Inc. — Principle Writer and Researcher

**Kenneth Wheatley**, DREAM, Inc. — Principle Writer and Researcher

**Tavia Scott**, DREAM, Inc.— Administrative Assistant

**Brandi K. Hersey**, DREAM, Inc. — Key Informant Interviewer and Researcher

**Babatunde Fahm**, Mississippi Department of Health — Key Informant Interviewer and Researcher

**Jenny Winstead**, DREAM, Inc. — Graphic Designer

**David Pepper**, DREAM, Inc.— Power Point and Technical Support

**Shane McNeill**, Office of Healthy Schools, Mississippi Department of Education—Key Informant

Apologies are extended to anyone who may have been inadvertently excluded from these acknowledgments.

# Table of Contents

Acknowledgements.....	i
Table of Contents.....	ii
Project Representation .....	iii
Executive Summary.....	1
Introduction and Purpose	
Methodology.....	2
Childhood Obesity Statistics .....	3
Overview of Current Efforts to Prevent Childhood Obesity in Mississippi.....	8
• School Initiatives	
• Community Initiatives	
• Policy Initiatives	
• Funding Sources	
Gaps and Recommendations: Key Informant Perspectives .....	25
References .....	29
Appendices.....	30
A. Key Informant Interview Guide	
B. Key Informant Interview Questions	
C. Key Informant Contact List	

## Project Representation

In order to carry out the vision and goals of the Mississippi POWER project, the Governor's Task Force on Childhood Obesity, an interdisciplinary policy team, has been established to guide and implement the project. Several of the Task Force members, or representatives from their agencies, served as key informants for this environmental scan. Task Force members include:

### **SHANE MCNEILL**

Director, Coordinated School Health, Office of Healthy Schools, MS Department of Education

### **REGINA GINN**

Director, Office of Healthy Schools, MS Department of Education

### **CANDICE WHITFIELD**

Health Policy Advisor, Mississippi Governor's Office

### **DR. SAM POLLES**

Executive Director, Mississippi Department of Wildlife, Fisheries and Parks

### **DR. ROBERT L. ROBINSON**

Executive Director, Mississippi Division of Medicaid

### **DR. HANK BOUNDS**

State Superintendent of Education, Mississippi Department of Education

### **DR. DANIEL W. JONES**

Vice-Chancellor of Health Affairs, University of Mississippi Medical Center

### **DR. VICTOR D. SUTTON**

Director, Office of Preventive Health, Mississippi Department of Health

### **REPRESENTATIVE CECIL BROWN**

Chair, House Education Committee, MS House of Representatives

### **SENATOR ALAN NUNNELEE**

Chair, Senate Public Health and Welfare Committee, MS Senate

### **WADE H. OVERSTREET**

Director, Blue Cross & Blue Shield of MS Foundation

### **ANNE TRAVIS**

CEO, The John D. Bower Foundation

### **BLAKE WILSON**

CEO, Mississippi Economic Council

### **DR. ED THOMPSON**

Interim State Health Officer, Mississippi Department of Health

# EXECUTIVE SUMMARY

## Introduction and Purpose

Through funding from the National Governors Association's (NGA) *Healthy Kids, Healthy America* Program, the state of Mississippi is poised to address the epidemic rise in obesity affecting thousands of Mississippi children by implementing the goals of the *Preventing Obesity with Every Resource* (POWER) Project. This multi-faceted state and community-based collaborative proposes the following goals:

- Provide consistent messages regarding the obesity epidemic and ways to combat obesity in children
- Match program areas in state agencies to maximize resources
- Promote legislative and state-level mandates/policies for physical education, health education and nutrition standards
- Identify ways to encourage parental and community support and efforts to prevent childhood obesity
- Seek funding opportunities at the federal, state and private levels
- Decrease the obesity rates in Mississippi's children

In recent years, Mississippi has been bombarded with numerous reports and studies chronicling the state's status in the area of obesity research; unfortunately, many of these reports have led to Mississippi earning the

infamous title of the "fattest state" in the nation. Consequently, Mississippians have responded to negative branding by vigorously working at both public and private sector levels to reduce

**"...unfortunately, many of these reports have led to Mississippi earning the infamous title of the 'fattest state' in the nation."**

childhood obesity rates and other related chronic health issues affecting citizens. This environmental scan presents information and facts from literature reviews and key informant interviews that outline the extent to which state and local governments, businesses, and community-based organizations are collaborating to address the prevalence of childhood obesity in Mississippi. Please note that the terms child overweight

and child obesity, are used interchangeably throughout this report. By definition, children are classified according to the Body Mass Index (BMI) as defined by the 2000 CDC Growth Charts for the United States. Hence, Overweight is classified as a BMI at or above the 95th percentile for children of the same age and sex, while at risk for Overweight applies to children with a BMI between the 85th – 94th percentiles. This report was prepared by Developing Resources for Education in America, Inc. (DREAM), a 501 (c)(3) community-based nonprofit organization as an external consultant for the Mississippi Department of Health, Office of Preventive Health.

# METHODOLOGY

---

This report describes:

- Current childhood obesity research
- Current school, community, and policy initiatives to address childhood obesity prevention
- Funding streams for childhood obesity prevention efforts in Mississippi
- Key informant feedback relative to identifying childhood obesity prevention efforts, gaps, and recommendations for combating the epidemic

An Internet search was conducted to obtain information related to childhood obesity prevention programs in Mississippi. A literature review of childhood obesity statistics and research was also undertaken.

In close coordination with the Mississippi Department of Health, Office of Preventive Health, a list of key informants and questions were compiled for a semi-structured interview to supplement Internet and literature searches. A total of 20 key informants were scheduled to be interviewed. Consequently, key informants would recommend others they believed could provide additional information. In total, 53 were interviewed. A good geographic representation was obtained across the state as well as representation across various sectors of the community including schools (8); universities (7); community-based organizations (7); state agencies (6); parent organizations (1); youth-serving organizations (3); military (1); health care organizations (3); local and state associations (4); population-specific groups (2); government (1); national organizations (1); foundations (3); public health advocates (3); physicians (1); and municipalities (2).

The approach for key informant interviews took the forms of in-person and telephone interviews. Although the list of questions was extensive, not all questions applied to all informants. In the event that key informants indicated time constraints when conducting phone interviews, questions were emailed. Three critical questions were posed:

- What efforts do you know about in your community or the state that are addressing childhood obesity prevention and who do you think are some key leaders and/or experts?
- What are your recommendations for addressing childhood obesity in Mississippi?
- What are some current gaps in addressing childhood obesity in Mississippi?

# CHILDHOOD OBESITY STATISTICS

The dramatic increase in the prevalence of adult and childhood obesity rates has resulted in a burgeoning public health crisis in the United States. According to the *National Health and Nutrition Examination Survey* (NHANES), it is estimated that approximately 66% of adult Americans are either overweight or obese and that 17% of children and adolescents between the ages of 2-19 are overweight. Conducted by the Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), NHANES is the nation's primary source for monitoring national progress toward reducing the prevalence of overweight and obesity. NHANES is a unique survey tool in that it collects measured data on height and weight through both personal interviews and mobile laboratory testing. According to the most recently published NHANES data, during the past three decades there has been a steady growth in the prevalence of overweight among children in the United States as shown in **Table 1**.



<b>TABLE I</b>				
<b>PREVALENCE OF OVERWEIGHT AMONG U.S. CHILDREN AND ADOLESCENTS</b>				
<b>SURVEY PERIODS</b>				
<b>Ages</b>	<b>NHANES I 1971-1974</b>	<b>NHANES II 1976-1980</b>	<b>NHANES III 1988-1994</b>	<b>NHANES 2003-2004</b>
2 through 5	5%	5%	7.2%	13.9%
6 through 11	4%	6.5%	11.3%	18.8%
12 through 19	6.1%	5%	10.5%	17.4%
Source: Centers for Disease Control and Prevention (CDC). Overweight Prevalence. Downloaded 8/14/07 from <a href="http://www.cdc.gov/2Fncddphp%2Fdnpa%2Fobesity%2F">www.cdc.gov/2Fncddphp%2Fdnpa%2Fobesity%2F</a> .				

These data clearly illustrate that little progress has been made toward achieving the 5% prevalence target for children and adolescents as called for in Healthy People 2010.

Among racial/ethnic groups, the prevalence of overweight was higher among non-Hispanic white boys (19.1%) than among non-Hispanic black boys (18.5%) and Mexican American boys (18.3%). Significant increases in the prevalence of overweight boys 12-19 years old occurred during the periods between NHANES III (1988-1994) and NHANES 2003-2004 as follows:

- Non-Hispanic white boys 11.6% to 19.1%
- Non-Hispanic black boys 10.7% to 18.5%
- Mexican American boys 14.1% to 18.3%

Non-Hispanic black girls 12-19 years old had the highest prevalence of overweight (25.4%) compared to that of non-Hispanic white (15.4%) and Mexican American (14.1%) girls; moreover, non-Hispanic black girls experienced the largest increase in prevalence of overweight when compared to the other two ethnic groups as follows:

- Non-Hispanic white girls 7.4% to 15.4%
- Non-Hispanic black girls 13.2% to 25.4%
- Mexican American girls 9.2% to 14.1%

The disparities among ethnic/racial groups should elicit concerns among public health officials in Mississippi, especially given that the state has the largest proportion of African-Americans. Moreover, in recent years the state has experienced a steady increase in its Hispanic population. Thus, targeted efforts will need to be taken into account to address rising obesity rates among our growing and culturally diverse population.

**“Targeted efforts will need to be taken into account to address rising obesity rates among our growing and culturally diverse population.”**

While national-level data such as NHANES provide reliable comparative statistics, state- and local-level data are most desirable for local planning efforts. There have been several studies recently conducted in Mississippi that examine the childhood obesity crisis. The Mississippi Health Policy Research Center issued a report in January 2004 entitled “Obesity among Mississippi’s Children,” that found prevalence rates obtained through direct measurement of students’ heights and weights were greater than self-reported survey data obtained through the surveys such as the *Youth Risk Behavior Surveillance Survey (YRBSS)*.<sup>2</sup> *The Child and Youth Prevalence of Overweight Survey (CAYPOS)*, conducted by a team of researchers at the University of Southern Mississippi under

direction of Dr. Jerome R. Kolbo, examined the prevalence of overweight and at risk for becoming overweight among Mississippi children in grades one through eight by using actual height and weight measurements instead of self-reported data. These results were then compared to national-



level data collected through YRBSS for students in grades six through eight. CAYPOS found that a high percentage of Mississippi first graders were already overweight; moreover, the research also found that prevalence rates increased by grade level.<sup>3</sup> Conducted April through May 2003, CAYPOS major findings were as follows:

- 24% of students in grades 1 through 8 were found to be overweight
- 14.7% of students in grades 1 through 8 were at risk for becoming overweight
- 25.2% of 6 through 8 grade students in the CAYPOS study were overweight compared to 18.5% of 6 through 8 grade students in the YRBSS study
- African-American girls reflected the highest combined rate of overweight and at risk for becoming overweight at 44.9%
- White boys had the highest rate of overweight at 26.7%

Finally, CAYPOS data found that prevalence rates for overweight and at risk for becoming overweight were higher than previously suspected, especially in the elementary grades (1 through 5), while prevalence for overweight among middle school students (grades 6 through 8) was greater than the self-reported data reflected in YRBSS. These results appear to confirm the need to use actual height and weight measurements when studying the prevalence of childhood obesity, while also providing an excellent source of local-level data to further document the prevalence of childhood obesity among Mississippi youth.



Building upon the results of the CAYPOS study, Dr. Kolbo and colleagues, in partnership with the Center for Mississippi Health Policy, examined public perceptions in Mississippi regarding childhood obesity during 2006 in a study entitled, “What Do Mississippians Think about Childhood Obesity?” It is believed that results from this study will be an integral part of crafting public health policies and strategies to curtail the escalating childhood obesity rates in the state. Researchers modeled survey questions after national-level research conducted in 2005 by the Robert Wood Johnson Foundation (RWJF) and the Harvard School of Public Health for comparative analysis. A total of 1,427 Mississippians were surveyed in October and November 2006. The following are some key survey highlights:<sup>4</sup>

- Approximately 94.8% of Mississippians consider childhood overweight to be a serious national problem
- Mississippians were almost evenly divided on whether reducing childhood overweight was a personal issue (46.7%) to be handled within the family, or a community issue (45%) requiring action by schools and community groups
- Approximately 56% of Mississippians believed that government should play a significant role in reducing overweight, while approximately 36.6% did not believe that government should play a significant role
- Requiring 30 minutes of daily physical activity in grades K-12 (94%)
- Including nutrition/fitness/health in school curricula (92.2%)
- Offering only healthy lunches in school (86.5%)
- Requiring BMI assessments of children (66.4%)
- More funding for recreation programs (90.7%)
- Requiring fast food restaurants to post nutritional information (84.8%)
- Taxing soda and soft drinks (58.9%)

According to the authors, the results clearly demonstrate that Mississippians are aware of our childhood obesity problems. Second, varying degrees of concerns and interests exists among citizens. Third, varying opinions by ethnicity, gender, age, and family composition exist. Comparatively, Mississippians are on par with national opinions regarding the subject; however, Kolbo et. al, found that Mississippians are more favorable to many of the suggested initiatives proposed to reduce childhood obesity. **Table 2** provides highlights from the comparative analysis between the Mississippi study conducted in 2006 and the national study conducted in 2005.

**TABLE 2 - COMPARATIVE ANALYSIS BETWEEN 2006 MISSISSIPPI PUBLIC PERCEPTION OF CHILDHOOD OBESITY SURVEY AND 2005 ROBERT WOOD JOHNSON FOUNDATION NATIONAL SURVEY**

Questions	Mississippi Survey (N=1,362)	RWJ/Harvard Survey (N=1,108)
1. How serious is obesity in children?	Very serious <b>72.2%</b> Somewhat 22.7%	Very serious <b>59%</b> Somewhat 33%
2. Is reducing obesity a personal or community issue?	Personal issue <b>46.7%</b> Community issue 45%	Personal issue <b>51%</b> Community issue 47%
3. Should government play a significant role in reducing obesity?	Significant role <b>56%</b> Not significant 36.6%	Significant role <b>38.0%</b> Not significant 57%
4. Should there be a law requiring 30 minutes of physical activity in schools?	Favor strongly <b>90.3%</b> Favor somewhat 3.7%	Favor strongly <b>77%</b> Favor somewhat 15%

**TABLE 2 - COMPARATIVE ANALYSIS BETWEEN 2006 MISSISSIPPI PUBLIC PERCEPTION OF CHILDHOOD OBESITY SURVEY AND 2005 ROBERT WOOD JOHNSON FOUNDATION NATIONAL SURVEY**

5. Law requiring BMI assessments for children in schools?	Favor strongly <b>57.5%</b> Favor somewhat 8.9%	Favor strongly <b>27%</b> Favor somewhat 24%
6. Law requiring nutrition, fitness and health education in schools?	Favor strongly <b>88.9%</b> Favor somewhat 8.9%	Favor strongly <b>27%</b> Favor somewhat 4%
7. Law requiring fast food restaurants to post nutritional information?	Favor <b>84.8%</b> Oppose 12.5%	Favor <b>79%</b> Oppose 19%
8. Law to tax soft drinks and use the money to fight obesity in children?	Favor <b>58.9%</b> Oppose 35.4%	Favor <b>50%</b> Oppose 47%
9. Law for more funding for recreation programs for children and teens?	Favor <b>90.7%</b> Oppose 8.2%	Favor <b>87%</b> Oppose 12%
10. Law requiring schools to offer only healthy lunches?	Favor <b>86.5%</b> Oppose 10.9%	Favor <b>85%</b> Oppose 14%

Collectively, results from the *Mississippi Public Perception of Childhood Obesity Survey* leave little doubt that Mississippians have heard the wake up call on this issue and have the personal, political, and community will to change the status quo.



The information ascertained through this environmental scan is proof that Mississippians are already proactively pursuing initiatives, policies, and programming to reduce what has become a leading risk factor for chronic health problems affecting thousands of Mississippi children.

# OVERVIEW OF CURRENT EFFORTS TO PREVENT CHILDHOOD OBESITY

---

While every effort was made to be as thorough as possible in discovering projects, programs, campaigns and funding sources related to childhood obesity in Mississippi, this scan is not exhaustive. In fact, one key informant suggested that a clearinghouse or database of childhood obesity programs be developed to serve as a networking tool and help to facilitate future collaboration.

What follows is a description of some of the current and past programs and collaborations that have addressed childhood obesity in Mississippi.

## School Initiatives

The **Mississippi Department of Education (MDE), Office of Healthy Schools (OHS)** has been at the forefront of efforts to reduce childhood obesity in recent years. Beginning with the formation of the Office of Healthy Schools in 2004, through generous funding and assistance from the John D. Bower Foundation, MDE is currently spearheading administrative and legislative policy changes designed to revitalize physical and health education in Mississippi's 152 public school districts. By placing all health and safety-related programs under one office, MDE is able to provide coordinated school health planning that clearly links student health with academic success. The following is a listing of OHS' healthy schools initiatives currently underway in Mississippi's schools:

- *Health is Academic: Start-up Grants*—the goal of this initiative is to increase student achievement by supporting and promoting nutrition and increased physical activity in schools. One-year grants are competitively awarded to form a School Health Council, conduct pre- and post-assessments, and to implement a sustainable intervention. These grants have helped to fund a wide range of health and physical activities such as allowing water consumption within the classroom to power walking sessions with administrators.



- *Health is Academic: John D. Bower, M.D. School Health Network*—this three-year initiative provides local school districts with technical assistance to implement the eight-pronged Coordinated

School Health Program (CSHP). To date, ten school districts have received a competitive grant of \$100,000 to implement a CSHP.

- *Health is Academic: Nutrition Integrity Project*—this initiative is designed to assess the impact of removing deep fat frying kitchen equipment and replacing it with economical alternatives such as baking equipment. Conducted as a case study, this initiative will assess the economic, staffing training, and ease of conversion impact at a public elementary, middle, and high school during 2007.



- *Excellence in Physical Education Certification Program*—MDE, in collaboration with the Governor's Commission on Physical Fitness and Sports, conducts an annual awards program that recognizes the commitment of public and private schools to quality physical education programming. Designed as an incentive program to encourage excellence in physical education programming. Plans are currently underway for the seventh annual program.
- *Five Star Food Grant*—this grant program allows schools to purchase a Sectionizer and Slicer and/or other kitchen equipment to increase consumption of fruits and vegetables by preparing attractive service lines focusing on healthy choices and improving child nutrition images.

- *Committed to Move Grant*—this initiative is designed to provide curriculum, training and resources based on the MS Standards for Physical Education. In order for schools to comply with the *MS Healthy Students Act's* mandate for 150 minutes of activity-based instruction per week in grades K-8, educators must implement a quality physical education program that includes a written physical education curriculum, policy and environmental actions, instructional strategies and regular student assessment.

- *The State Nutrition Action Plan (SNAP)* is a process that fosters strong collaboration and information sharing across program lines and supports implementation of more integrated nutrition education and promotion activities at state and local levels. *SNAP* is a program of the Food and Nutrition Service (FNS). The mission of FNS is to provide children and needy families better access



to food and a more healthy diet through its food assistance programs and comprehensive nutrition education efforts. The goal of Mississippi's plan is to promote consumption of fruits and vegetables through partnerships and collaborative interventions between the USDA nutrition assistance program and other related groups.

- *Action for Healthy Kids (AFHK)*—The mission of this national program is to engage diverse organizations, leaders and volunteers in actions that foster sound nutrition and good physical activity in children, youth and schools. The Mississippi project's activities include distributing ReCharge Kits! to schools. Each ReCharge Kit! includes an instructor's notebook with 29 hands-on lesson plans, equipment to implement the lessons, a training DVD, poster, healthy snack guide, NFL players' cards and newsletters for families.



Collectively, these programs illustrate the leadership role of the Mississippi Department of Education, Office of Healthy Schools (OHS) in addressing the childhood obesity epidemic. It is important to note that OHS has sustained viable partnerships with several state agencies, universities, and community-based organizations, which have made efforts to achieve positive outcomes much more likely. These partnerships will be referenced in others sections of this environmental scan. To ensure that important data are captured, MDE is also partnering with the Mississippi Department of Mental Health by sponsoring a data repository at [www.snapshots.ms.gov](http://www.snapshots.ms.gov).

Although all school districts may not have grants from the Office of Healthy Schools' Bower Foundation, several school districts have attracted other funding sources. In a precedent-setting example of schools and communities working together, the Mississippi Transportation Commission approved funding for the first *Safe Routes to School* (SRTS) Project. In July 2007, approximately \$2,000,000 in funds were awarded to twenty grantees. The three goals of (SRTS) are to reduce traffic congestion, improve air quality and increase physical activity. Schools receiving these grants include: Poindexter Elementary School, Jackson; Chastain Middle and Barr Elementary School, Jackson; Charleston Elementary and Middle School, Tallahatchie School District; Lumberton Public Schools; and Bay St. Louis-Waveland School District.

Another grant program supporting schools in addressing physical education and nutrition is the U.S. Department of Education's *Carol M. White Physical Education Program* (PEP). This program provides grants to initiate, expand, and improve physical education programs for K–12 students in order to help them progress toward meeting state standards for physical education. Since 2001, Mississippi schools have received more than \$15,000,000 in grant awards. Grant recipients in 2007 include Cleveland School District, Quitman School District, and Poplarville School District.

Finally, this scan revealed the wide variety of programs and activities that schools have implemented and how many have gone beyond state standards to address nutrition and physical education. These programs range from schools enhancing their wellness plans, opening their school's fitness facilities for after-hour community activities and purchasing licenses for each school building to have access to the Discovery Channel's Web-based physical education curriculum, which is tied to state standards.



## Community Initiatives

As Mississippi schools and communities implement programs designed to help children develop healthier lifestyles, many key informants cautioned that best practices should always be utilized. Also expressed was the importance of bridging the gap between research and practice. Clearly, research plays an important role in addressing childhood obesity. To that end, The University of Southern Mississippi's College of Health has embarked on several important research projects:



- *Child and Youth Prevalence of Overweight (CAYPOS) Survey* to assess prevalence of obesity in Mississippi children using a representative sample of public school students in grades K-12 (2007) and 1-8 (2003-2005). Principal investigator: Dr. Jerome Kolbo.
- *2006 Local School Wellness Policy Survey* – survey of Mississippi school principals to assess implementation of the Child Nutrition and WIC Reauthorization Act of 2004, which requires school districts to establish a local wellness policy. Principal investigator: Dr. Jerome Kolbo.
- *Assessing the Financial Impact of Vending Machine Changes in Mississippi Schools*. This study assessed in 28 Mississippi middle and high schools, the financial impact of schools to changing vending beverage choices from carbonated sugar-sweetened beverages to water, 100% juice and sports drinks. Principal Investigator: Dr. Denise Brown.
- *Relationship of Child Body Mass Index to Parental Child Feeding Practices, Weight Perceptions, and Personal Eating Behaviors among 3-5 Year Olds Attending Head Start*. Survey of approximately 350 mothers/caregivers of Head Start children in a local Head Start program examining these questions. Principal Investigators: Dr. Wendy Bounds and Dr. Carol Connell.
- *Summer Nutrition Athletic Program (SNAP)*. Intervention in a Delta community under the auspices of the Delta Nutrition Intervention Research Initiative, in collaboration with Alcorn State University, the city of Hollandale, Mississippi State University Extension Service and USDA/ Agricultural Research Service. Evaluates the impact of a summer soccer and nutrition education program on BMI and body composition of about 80 children ages 5-12.
- *School Kids Access to Treats to Eat (SKATE)*: A fruit and vegetable promotion for better health intervention in a Delta community under the auspices of the Delta Nutrition Intervention Research Initiative, in collaboration with Alcorn State University, the city of Hollandale, Mississippi



State University Extension Service and USDA/Agricultural Research Service. Evaluates the impact of offering fruits and vegetables as snacks in the classroom (4th -6th grade) on children's willingness to try and their preferences for a variety of fruits and vegetables.

- *Exploring Health Literacy as a Factor Contributing to Adoption of the 2005 Dietary Guidelines among Adults in the Mississippi Delta.* This survey research and focus groups involving 175 adults in six Delta counties. Relates indirectly to childhood obesity from the standpoint that if parents do not understand how to follow a healthy diet their children are not likely to be given healthy food choices at home. Principle Investigator: Dr. Jamie Zoellner.

Though schools have made promising strides in their efforts to address childhood obesity, several viable national, statewide, and local programs are being implemented by community organizations. These community organizations are also cultivating strong partnerships with schools.

Mississippi is currently involved or planning to be involved in national fitness and nutrition campaigns including the *President's Challenge* and *The Alliance for a Healthier Generation*, founded by the William J. Clinton Foundation and the American Heart Association.

Perhaps the most well-known statewide campaign is Blue Cross & Blue Shield's *Let's Go Walkin' Mississippi* Campaign, which provides free pedometers, tracking logs, and other resources to the public. The *Let's Go Walkin'* program will be expanded into Mississippi schools this year. Many key informants said that this campaign did a great deal to bring exposure to fitness and health. As one key informant remarked, "There is no excuse for anyone not to become involved in improving his or her own health because there is information disseminated virtually every hour through every medium and programs in every area of the state."

Again, the *Safe Route to Schools* program is another way to connect communities and schools. The program also recently funded municipalities that partnered with schools to engage in such activities as improving walking and cycling paths and other infrastructure and non infrastructure activities. The municipal grantees are: City of Madison, Town of Pelahatchie, Noxubee County Board of Supervisors, City of Amory, City of Horn Lake, City of Oxford, City of Starkville, City of West Point, Lowndes County Chapter-Safe Kids MS, City of Greenwood, City of Pearl, and Gulfport Police Department.

In conclusion, there are myriads of organizations from all sectors of the community working together to address childhood obesity. Their efforts aim to increase in greater awareness of the issue, more

outreach to parents, policy changes, and positive outcomes in weight reduction and overall fitness. The following table merely offers a sampling of current childhood obesity prevention efforts in Mississippi.

<b>TABLE 3</b> <b>MISSISSIPPI CHILDHOOD OBESITY PREVENTION EFFORTS AT-A-GLANCE</b>			
<b>Who</b>	<b>What</b>	<b>Where</b>	<b>Comments</b>
<b>Education</b>			
<b>Pre-K</b>			
Mississippi Head Start Association	<ul style="list-style-type: none"> <li>·Plan to pilot a national Head Start Curriculum called “I’ll Move, I’ll Learn” tying fitness and health to academic achievement</li> <li>·Several Head Start programs are using the Sparks Curriculum research-based elementary PE program</li> </ul>	<p>Seven Head Start Programs statewide. Programs areas currently not identified</p> <p>Various areas around the state</p>	Efforts led by John Hale, Director of Pearl River Valley Opportunities Head Start
<b>K-12 Schools</b>			
Mississippi Private School Association	<ul style="list-style-type: none"> <li>·Not currently involved in efforts, but met with Coke and Pepsi to discuss healthier beverage options. Some schools have already begun offering healthier beverages</li> </ul>		Administrators support additional efforts
Mississippi Band of Choctaw Indians	<ul style="list-style-type: none"> <li>·Coordinate daily walking for students</li> <li>·Enhanced school wellness policy (75% healthy for students and staff)</li> <li>Implemented vending guidelines</li> <li>·Diabetes Prevention program tracks early childhood and K-12 students’ BMI, blood sugar, height and weight annually</li> </ul>	Philadelphia, MS	Choctaw Health source estimates 60-65% of students are obese
<b>Colleges/Universities</b>			
University of Southern Mississippi	<ul style="list-style-type: none"> <li>·Conducted several childhood obesity-related research projects</li> </ul>	Statewide	<p>Offer nutrition and obesity course to Master’s and PhD students bi-annually</p> <p>Offer undergraduate online child nutrition course bi-annually</p>

**TABLE 3**  
**MISSISSIPPI CHILDHOOD OBESITY PREVENTION EFFORTS AT-A-GLANCE**

Mississippi State University Cooperative Extension Service	<ul style="list-style-type: none"> <li>·Implement multiple programs targeting K-12 students, parents, and other adults using nutrition and fitness curricula from various sources. Programs include:</li> <li>·Mississippi in Motion</li> <li>·Expanded Food and Nutrition Education Program(EFNEP)</li> <li>·Delta Nutrition Intervention Research Initiative (DELTA NIRI)</li> <li>·Body Walk</li> <li>·Food Nutrition Program (FNA)</li> <li>·Use teaching tools: <i>OrganWise Guys</i>, <i>Take 10!</i></li> </ul>	Statewide Delta NIRI concentrating in Hollandale, MS	<p>Train paraprofessionals to teach curricula; utilize youth to teach younger students during summer. EFNEP will expand into every county by 2009. Partner with Dept. of Education/Bower to train food service personnel through <i>Five Star Food</i> Program and collaborate on the <i>Committed to Move</i> program</p> <p><i>HOPE Project</i> was voted as a Gold Standard program</p> <p>Funding Sources: Blue Cross &amp; Blue Shield of MS Foundation, Attorney General's Office, MS Rural Corporation</p> <p>Partners: MS Dept. of Human Services, USDA</p>
<b>Community-based Organizations</b>			
Black Women's Health Initiative	<ul style="list-style-type: none"> <li>·Newly formed group of African American women looking to change the quality of life for 5th grade girls. Fitness and nutrition large part of effort</li> </ul>	Van Winkle and Walton Elementary Schools in Jackson, MS	<p>Co-chaired by Carol Burger of United Way of Capital Area</p> <p>Collaborative effort between Jackson Hinds Comprehensive Health Center and United Way of Capital Area</p>
Unity Health Services	<ul style="list-style-type: none"> <li>·Conduct Training –of-Trainers sessions using the <i>Train up a Child</i> curriculum by the American Diabetes Association. Curriculum targets parents with messages to set good examples for fitness and nutrition</li> </ul>	Metro Jackson	Trained Operation Shoe String staff to implement curriculum
Jackson Road Map	<ul style="list-style-type: none"> <li>·Implementing program called “Lean Back” taken from a popular Hip Hop song. The overall goal is to change the institutional structures that affect community and individual behaviors relating to healthy nutrition and physical activity early in life.</li> </ul>	Working within a feeder school pattern: Johnson Elementary, Brinkley Middle, and Lanier High School-Jackson, MS	<p>\$1.5 million from W.K.Kellog over 3 years</p> <p>Evaluation by the University of North Carolina</p> <p>Initial activity will be focused on proposing a nutrition plan developed in conjunction with parents.</p>
Mississippi 2020 Network	<ul style="list-style-type: none"> <li>·This group's mission is to sustain Mississippi communities. Work related to childhood obesity involves helping 3rd -5th grade students create organic gardens</li> </ul>	Statewide	Private funding sources
Healthy Jackson	<ul style="list-style-type: none"> <li>·Interactive Web site to help residents understand and manage their health and track diet and exercise goals</li> <li>·Toll-free number for residents to order a free membership kit stocked with fun ideas for fitness</li> <li>·On-line health assessment tool</li> </ul>	Metro Jackson	<p>A national project of American Pharmaceutical companies, local health care providers, employer, and community leaders.</p> <p>This group will be working with the Jackson YMCA to form a Blue Ribbon Commission to address obesity</p>

**TABLE 3**  
**MISSISSIPPI CHILDHOOD OBESITY PREVENTION EFFORTS AT-A-GLANCE**

Delta Health Alliance	<ul style="list-style-type: none"> <li>· Healthy Lifestyles Outreach Project in partnership with Mississippi Valley State University to promote community education and wellness in the areas of chronic obesity-related disease, prenatal care awareness and diabetes patient self-management</li> </ul>	The Delta Health Alliance was founded in 2001 to address health issues in the Mississippi Delta. The Delta Health Alliance is a partnership founded by Delta State University, Mississippi State University, Mississippi Valley State University, University of Mississippi Medical Center, and Delta Council	Funding source: Human Resources Service Administration (HRSA)
Jackson Junior League	<ul style="list-style-type: none"> <li>· Will include a Health Gallery in the new Children's Museum scheduled to open Fall 2007. Hands-on exhibits and programs will focus on literacy, health and nutrition, and helping children mature into healthy adults.</li> <li>· Hosts national project called <i>Kids in the Kitchen</i>. Program designed to teach kids how to cook healthy foods. Ongoing events will be held involving cooking demonstrations with well-known chefs.</li> </ul>	Jackson, MS	<p>Funding: Blue Cross &amp; Blue Shield of MS Foundation and many other corporate sponsors</p> <p>Sponsors for <i>Kids in the Kitchen</i> include University of MS Medical Center, Baptist Hospital, The Clarion-Ledger and Northpark Mall</p>
Mississippi Food Network	<ul style="list-style-type: none"> <li>· Targets elementary and middle school youth in low income areas with nutrition education</li> <li>· Implement <i>Fresh Produce</i> program where families get discounted produce</li> </ul>		Funding sources: Kellogg Foundation and the MS State University Cooperative Extension Service
<b>State Agencies</b>			
Mississippi Department of Education	<ul style="list-style-type: none"> <li>· Created Office of Healthy Schools to ensure more coordinated comprehensive health</li> <li>· Leading efforts to assist schools in meeting state standards for PE, Nutrition</li> </ul>	Statewide	<p>Funding from the Bower Foundation to provide financial support to schools to form health councils, and other activities</p> <p>See school initiatives section in this report for listing of grants</p> <p>Funded by <i>Safe Routes to School</i> (SRTS) Program to develop lesson plans to support the link between SRTS and health education</p>
Human Services	<ul style="list-style-type: none"> <li>· Division of Medicaid has worked in partnership with Departments of Health and Education, statewide and local programs on nutrition and physical education projects</li> </ul>	Statewide	

**TABLE 3**  
**MISSISSIPPI CHILDHOOD OBESITY PREVENTION EFFORTS AT-A-GLANCE**

Wildlife and Fisheries	<ul style="list-style-type: none"> <li>·Developed curriculum called <i>No Child Left Inside</i> targeting 9th-12th grade students in public and private schools. ·Uses compasses and various other tools to help students engage in outdoor activities.</li> <li>·Host interactive Web site that kids can join that provides creative ideas for activities outside, fun chats with conservation staff, and coupons.</li> <li>·Sponsor archery lessons for kids</li> </ul>	Statewide	DOE's Office of Healthy Schools helped tie curriculum to state standards for PE. Curriculum available for teachers soon.
Mississippi Department of Health	<ul style="list-style-type: none"> <li>·Childhood obesity is a major initiative</li> <li>·Implementing <i>BodyWorks</i>, a program designed to help parents and caregivers of young adolescent girls (ages 9 to 13) improve family eating and activity habits. Using the <i>BodyWorks</i> Toolkit, the program focuses on parents as role models and provides them with hands-on tools to make small, specific behavior changes to prevent obesity and help maintain a healthy weight.</li> </ul>	Statewide	<p>Training for educators, community leaders, school nurses, girl scout leaders and others on the <i>Body Works</i> Program. All training will be held in Jackson.</p> <p>Department of Health received funding from the <i>Safe Routes to School</i> Program to promote bicycle and pedestrian safety</p>
Office of the Governor	<ul style="list-style-type: none"> <li>·Health Policy Advisor is active part of Coordinated School Health efforts and works with Departments of Education, Health, Human Services on matters regarding childhood obesity. Governor's office is actively involved in many efforts including <i>Let's Go Walkin' Mississippi</i> Campaign.</li> <li>Health Advisor serves as Governor's liaison for Governor's Commission on Physical Fitness</li> <li>·Received a National Governor's Association Grant, which will enable the state to develop long-term strategies through policy and environmental changes</li> <li>·Established the Governor's Task Force on Childhood Obesity</li> </ul>	Statewide	

**TABLE 3**  
**MISSISSIPPI CHILDHOOD OBESITY PREVENTION EFFORTS AT-A-GLANCE**

<b>Foundations</b>			
Community Foundation of Northwest MS	<ul style="list-style-type: none"> <li>·Introduced the SPARKS curriculum to Head Start programs in several counties</li> <li>·Held regional health summits</li> <li>·Help fund walking trails in communities</li> <li>·Provided \$10,000 grants to health councils to develop action plans and implement programs</li> <li>·Formed a <i>Healthy Church</i> network for African-American churches</li> <li>·Implement Project Tate—component of <i>Get a Life</i> program</li> </ul>	Counties of: <ul style="list-style-type: none"> <li>• Quitman</li> <li>• Tate</li> <li>• Desoto</li> <li>• Panola</li> <li>• Coahoma</li> <li>• Marshall</li> <li>• Tallahatchie</li> <li>• Tunica</li> </ul>	\$500,000 dollar grant (5 yrs) from the Robert Wood Johnson Foundation Grants from Blue Cross & Blue Shield of MS Foundation, Dreyfus Health Foundation, and others. Activities include Sit and Be Fit Night, Food Adventure Night, Junk Food Free Days
Blue Cross & Blue Shield of Mississippi Foundation and Blue Cross & Blue Shield of Mississippi Corporation	<ul style="list-style-type: none"> <li>·<i>Let's Go Walkin' Mississippi</i></li> <li>·<i>Let's Go Walkin' Mississippi</i> School Campaign which provides Web site, posters, stopwatches, banners, and teacher logs to support components of the Healthy School Act</li> </ul>	Statewide  Yazoo City Schools, Hattiesburg Public Schools, Rankin County School District, Meridian City Schools, Jackson Public Schools: Pecan Park and Oak Grove Elementary Schools	Provide free pedometers and tracking logs  Each school will receive a \$5,000 check when they complete 5,000 minutes of physical activity. Although pilot schools are part of the initial effort, any school may participate but are not qualified for the \$5,000 incentive
<b>Parent Organizations</b>			
Mississippi PTA	<ul style="list-style-type: none"> <li>·Not currently involved in efforts, but local chapters are involved in various activities</li> </ul>		
<b>Youth-Serving Organizations</b>			
Jackson YMCA	<ul style="list-style-type: none"> <li>·Will be partnering with Healthy Jackson to form a Blue Ribbon Committee to address childhood obesity</li> </ul>	Metro Jackson	
Boys and Girls Clubs of Central MS	<ul style="list-style-type: none"> <li>·Extensive health and recreation programs</li> </ul>	Central MS	Funding sources: General Motors, Triple Play and Kraft
Middle Mississippi Girl Scouts	<ul style="list-style-type: none"> <li>·Fitness and nutrition has always been part of programming.</li> <li>·Provides nutrition and physical education through various camps</li> <li>·Hold classes for girls on body image and eating disorders</li> </ul>		
<b>State and Local Associations</b>			
Diabetes Foundation of MS	<ul style="list-style-type: none"> <li>·Free health scans for African Americans</li> <li>·Ongoing education programs</li> <li>·Partnership with Dr. Warren Jones to launch an initiative with African American churches</li> </ul>	Statewide	Funding sources: Private donations and fundraisers

**TABLE 3**  
**MISSISSIPPI CHILDHOOD OBESITY PREVENTION EFFORTS AT-A-GLANCE**

American Heart Association	<ul style="list-style-type: none"> <li>·Implement national campaign—Go <i>Healthy Challenge</i>, which was founded by the Clinton Foundation and The American Heart Association.</li> <li>·Implement the <i>Search your Heart</i> Program aimed at educating the community about heart disease through faith-based channels</li> </ul>	Statewide	<i>Search your Heart</i> is funded by Blue Cross & Blue Shield of MS Foundation
Mississippi Alliance for School Health	<ul style="list-style-type: none"> <li>·Supports health issues in Mississippi through advocacy, annual conference, and other mean</li> </ul>	Statewide	
American Diabetes Association	<p>Currently have two initiatives:</p> <ul style="list-style-type: none"> <li>·<i>Train up a Child</i> curriculum, which targets parents and teaches them to provide healthier foods for children and to workout with their children</li> <li>·<i>School Walk</i>-part fundraising campaign, this program provides free curriculum to teachers. It gives them ideas for fitness activities and helps them teach students about healthy lifestyles</li> </ul>	Statewide	Mississippi Office based in Birmingham, AL. Regional coordinators make regular trips to Mississippi
<b>Health Service Organizations</b>			
Jackson Heart Study	<ul style="list-style-type: none"> <li>·Coordinate quarterly walking groups with parents and children in the local park</li> <li>·Will coordinate quarterly walking groups in Rankin County</li> </ul>	Canton, MS	
<b>Military</b>			
Mississippi National Guard Family Support Program	<ul style="list-style-type: none"> <li>·Conduct ongoing fitness programs through youth camps</li> <li>·Conduct ropes courses</li> </ul>	Statewide	Interested in learning about more initiatives to address youth obesity
<b>Municipalities</b>			
Mayor of Lucedale	<ul style="list-style-type: none"> <li>·Started a Mississippi Municipal League in Lucedale</li> <li>200 Lucedale residents participated in Mississippi in Motion campaign and half completed</li> <li>·Received a John D. Bower Grant to train school dieticians</li> <li>·Will collaborate with two surrounding towns to launch fitness contest</li> </ul>	Lucedale, MS	
<b>Public Health Advocacy</b>			
Mississippi Health Advocacy Program	Submitting a revision to the current grocery tax lift for junk food. Instead, will push to have grocery tax lifted from healthier foods like fresh produce and whole grains	Statewide	

# Key Mississippi Policies and Standards Regarding Nutrition, Physical Activity and Physical Education

Most of the key informants interviewed agreed that there should be ongoing proactive measures to push public policies to support and reinforce childhood obesity prevention efforts. Several informants said they would like to see more emphasis on school breakfast and lunch policies. Interestingly, some informants were not aware that the Mississippi Legislature passed the *Healthy School Act* in January 2007.

**Table 4** provides a snapshot of current Mississippi policies and standards regarding nutrition, physical activity and physical education. More details are available on the Mississippi Department of Education's Web site at [www.healthyschoolsms.org](http://www.healthyschoolsms.org).

<b>TABLE 4</b> <b>MISSISSIPPI POLICIES AND STANDARDS REGARDING NUTRITION, PHYSICAL ACTIVITY AND PHYSICAL EDUCATION</b>		
<b>Policy</b>	<b>Legislation</b>	<b>Passed</b>
SB 2369—Mississippi Healthy School Act		January 31, 2007
Physical Activity-based Instruction	·To require a minimum period of physical activity-based instruction and a minimum period of health education instruction in grades K-8	
Require one-half Carnegie Unit	·To require one-half of a Carnegie unit in physical education or physical activity in grades 9-12 for graduation	
Local School Wellness Policy	·To provide that beginning with the 2006-2007 school year, the school wellness plans of local school districts shall promote increased physical activity, healthy eating habits and abstinence from the use of tobacco and illegal drugs	
Physical Activity Coordinator	·To require the appropriation of sufficient state-source funds for the State Department of Education to employ a physical activity coordinator to assist school districts in the implementation of physical education programs	
Mandatory Duties of School Health Councils	·To provide that the recommendations of the local school health councils shall be based on a coordinated approach to school health	
Child Nutrition Programs	Requires the State Board of Education to adopt regulations to improve breakfast and lunch programs	



**TABLE 4**  
**MISSISSIPPI POLICIES AND STANDARDS REGARDING NUTRITION, PHYSICAL ACTIVITY AND PHYSICAL EDUCATION**

Policy	Legislation	Passed
Food and Beverage Compliance	·To direct the State Board of Education to adopt regulations, for compliance by school districts beginning with the 2008-2009 school year, that address the following areas: healthy food and beverage choices; healthy food preparation; marketing of healthy food choices to students and staff; food preparation ingredients and products; minimum and maximum time allotment for students and staff lunch and breakfast periods; the availability of food items during the lunch and breakfast periods; and methods to increase participation in the child nutrition school breakfast and lunch programs	
State Appointed Advisory Council	·To provide that the State Superintendent of Public Education shall appoint an advisory committee to assist the state board of education in developing the regulations required by this act; and for related purposes.	
Physical Education Standards	·State standards exist for physical education and are based on the National Standards for physical education.	
School Health Advisory Council	·Education Code 37-13-134(1990) requires each school board to appoint a local health education council that serves to make recommendations for health curriculum by allowing local school boards to establish a local school health/physical education advisory council.	
State-level Health Care Coordinating Council	·Public Health Code 41-105-1 (2002) creates the state-level Health Care Coordinating Council to provide recommendations in establishing a comprehensive preventive healthcare plan. Public Health	
School Nurse	·Code 41-79-5 (2000) requires each public school district to employ a school nurse to serve as the Health Service Coordinator	
Competitive Food Policy <i>Mississippi participates in USDA Fruit and Vegetable Program</i>	·No food to be sold on campus for one half hour before breakfast or lunch and until the end of either serving period. School food service shall sell only those foods that are components of the approved Federal meal patterns being served (or milk products). With the exception of milk products, a student may purchase the individual components of the meal only if the full meal also is being purchased.	
<b>Current Policies on Food in Schools</b> <ul style="list-style-type: none"> <li>• Adopted a policy stating that districts will have someone to oversee or coordinate food service in the district</li> <li>• Require food service coordinators to earn continuing education credits on nutrition or school food service to maintain state certification and licensure</li> <li>• Offer certification, licensure for district food service coordinators</li> <li>• Teach nutrition and dietary behavior in elementary, middle/junior and high schools</li> </ul>		

Source: Web site for *Action for Healthy Kids*—State Profile on Nutrition and Fitness  
 Compiled by the Council of Chief State School Officers with support from *Action for Healthy Kids*

Mississippi is on track with national efforts to impact beverage and snack selections in schools. Thus, the State Board of Education has approved beverage and snack regulations (10/20/06). As of the 2007-2008 school year, all full calorie, sugared carbonated soft drinks shall no longer be sold to Mississippi students during the day. Beginning with the 2008-2009 school year, only select beverages will be available through vending machines and beverage selections will vary according to grade levels.

Relative to snack regulations, food sales outside of Child Nutrition Programs, including vending machines, student stores, snack bars, and other fundraising programs, are available at the discretion of the school district. When schools decide to offer vending, they shall provide a selection of health food options to students. The policy has specific criteria for offerings based on nutritional data or nutrition facts labels. Detailed lists of these offerings are available on MDE's Web site.



## Funding Sources

An attempt was made to identify the various funding streams for childhood obesity-related prevention efforts in Mississippi. Some of the funding streams were mentioned multiple times during conversations with key informants and others were found through literature and internet searches. Several funders were contacted directly and asked to share estimated funding amounts to date or for 2006 and 2007. Some funders were unable to provide this information specifically for “childhood obesity” because funds may be “lumped” with other programs or because such requests have to be made months in advance. Also, some funding sources “flowed through” funds to private foundations, which can cause duplication when tracking dollars.

Given these limitations, **Table 5** shows the estimated amounts that were gathered.

<b>TABLE 5</b>		
<b>Funding Sources</b>	<b>Estimated funds</b>	<b>Notes</b>
Blue Cross & Blue Shield of Mississippi Foundation	\$1.5 Million (2007)	Fund multiple projects including <i>Mississippi in Motion</i> , <i>HealthWorks!</i> , <i>Get a Life Campaign</i> , <i>Project Fit America</i> , <i>Health Gallery Exhibit</i> , <i>Search Your Heart</i> Source: Blue Cross & Blue Shield Web site
Blue Cross & Blue Shield of Mississippi Corporation	\$160,000	Fund <i>Let's Go Walkin'</i> Program in pilot schools in Mississippi
John D. Bower Foundation	\$7,000,000	Assist DOE's Office of Healthy schools to provide in-depth preparation to local school districts for the implementation of a Coordinated School Health Program (CSHP) Model. See School Initiatives section in this document for a list of programs funded by the John D. Bower Foundation. Source for funding amount: John Sturdivant, CFO.
US Department of Education Carol White Physical Education Program (PEP)	\$15 Million (2001-2007)	Support innovative approaches to health and physical activity. Grant can be used for staff development and training teachers, purchase of equipment and other support necessary to enable students to participate actively in physical education activities. Since 2001, eight Mississippi school districts have received funding Source: US DOE Web site
W.K. Kellogg Foundation	Funding Amount Unavailable	Have made substantial grant awards to Mississippi programs. Some of these awards are referenced in the <i>Mississippi Childhood Obesity Efforts-at-a-Glance</i> section in this report.

**TABLE 5**

Save the Children	\$94,000 (2007)	Fund implementation of the <i>Creating Healthy, Active, and Nurturing Growing-up Environments</i> (CHANGE) program targeting elementary school students in Bolivar, Coahoma, and Quitman Counties Source: Vivica Kraak, M.S., R.D., Nutrition and Physical Activity Advisor, Save the Children
Dreyfus Health Foundation	Amount unavailable	Joined Blue Cross & Blue Shield Foundation to fund Community Foundation of Northwest Mississippi's <i>Get a Life</i> program targeting elementary school children and parents Source: <i>The Democrat</i>
MS Department of Transportation <i>Safe Routes to School</i> (SRTS)	\$2,899,220 (2007) (Approved by the MS Transportation Commission)	Recently funded 17 school districts and cities to make infrastructure and non-infrastructure changes to reduce traffic congestion, improve air quality and increase physical activity. Made three statewide awards to MS Department of Education to develop lesson plans; MS Department of Health to promote bicycle and pedestrian safety; and Safe Kids MS to standardize training materials, presentations, and evaluation of bicycle and pedestrian safety Source: Cookie Leffer, Coordinator, MS DOT
Robert Wood Johnson Foundation (RWJF)	\$1,042,816 (2007)	Have made substantial grant awards for childhood obesity prevention in Mississippi. Some of these awards are referenced in the <i>Mississippi Childhood Obesity Efforts-at-a-Glance</i> section in this report. Source: Vanessa Ferrill, RWJF
Mississippi Beverage	\$30,000 grants	Provides grants to purchase PE equipment Source: Shane McNeil, MS Dept. of Education
Mississippi State Tennis Association	Amount unavailable	Provides funds for tennis equipment and conducts training Source: Shane McNeil, MS Dept. of Education
Pearl River Valley Foundation	\$382,000	Joint effort with Blue Cross & Blue Shield Foundation of MS Foundation and Robert Wood Johnson to fund the <i>Healthy Lifestyles</i> program for K12 students in Picayune, Poplarville, and Pearl River Central Schools. Source: Pearl River Valley Foundation Web site



# GAPS AND RECOMMENDATIONS: KEY INFORMANTS PERSPECTIVES

---



Perhaps the most rigorous discussions with key informants were around gaps and recommendations relative to childhood obesity in Mississippi.

One informant stated that, “It’s too early to identify gaps and we need to get a handle on what we are already doing.” He believes schools are implementing most of the efforts to address childhood obesity, but need support from the community and legislators. Along those same

lines, another key informant spoke very passionately about what he termed as “the lack of will” of policy makers to fully fund and mandate comprehensive health education. He further stated that we must promote more activism among our parents to drive educators to drive policy makers to put their words into actions for the benefit of Mississippi’s children.

In terms of recommendations for addressing childhood obesity, several key informants were concerned that the issue would not become just another “disease of the month” with people chasing funds because obesity is a hot issue right now. One informant stated that although there are well-meaning people who want to implement obesity prevention programs, very few people have the skills, knowledge and experience when it comes to childhood obesity. “First do no harm is very important.” She said that she has observed people who have delivered presentations using scare tactics that have made children afraid of food. She further stated that we must have positive and consistent messages about healthy eating and exercise.

One informant stated that funding alone would not impact obesity. She said that there are 27 states that have received Centers for Disease Control (CDC) funding through a multi-year, two-phase grant (planning, implementation) and that Mississippi should work with one of those states to learn from them. She went on to express that policy is a critical first step and communities will have to have some incentive to have green spaces (trails), especially in low-income communities with safety assurances. She stated that map overlays had been used to show how disproportionate trails and green spaces are to low-income environments.

Listed below are some gaps that key informants identified as well as recommendations for combating the epidemic. Because common themes surfaced around the recommendations, they have been grouped in categories.

## Gaps

- Lack of primary prevention and utilization of childhood obesity prevention “fundamentals”
- Lack of “seamless” education between school, home and community
- Lack of screening children for overweight and obesity
- Lack of a bridge between research and practice regarding health promotion and overweight/obesity prevention and treatment

## Recommendations

### Information/Awareness

- Develop “Talking Points” for lay people on childhood obesity so that they may educate others
- Establish a *Mississippi Childhood Obesity Clearinghouse* or Web site to keep people informed/connected
- Provide more education on the cultural aspects of obesity
- Support or create comprehensive community and school-level campaigns to promote healthy behaviors
- Promote healthy child public places

### Capacity-building

- Train and educate health educators on best practices for addressing childhood obesity. There is not much expertise about childhood obesity in state agencies at this time. We have lots more to learn
- Need to approach obesity using the public health model: agent (food), host (individual), and environment (policies)—all three must be addressed in order to see change
- Avoid using the term “obesity.” We need common language that’s empowering and not stigmatizing



## Strategies

- Target pre-K and Head Start children—knowledge alone does not change behavior—need to develop habits early. Include day care operators, nurseries, foster care parents and others. Children and adolescents must be priorities based on Mississippi's epidemiology data
- Work with food and beverage industry representatives to offer healthful alternatives to the high-fat and high-sugar snack foods and soft drinks typically offered in vending machines
- Avoid one shot approaches. Multiple strategies must be utilized
- Engage youth in planning and delivering programs. They can best reach their peers. Need to conduct training for girls on eating disorders and body image.

## Funding

- Develop a tracking system or funding stream survey to determine where dollars are coming from to address childhood obesity, where they are going, and how funds are being used
- Need more diversity in the kinds of groups that are being funded. Grassroots groups are being overlooked. There seems to be stronghold on the funds among a select group of agencies
- Need to engage in mapping to determine where the real problems are in the state and direct funds to where the data shows greatest needs. Some areas are overlooked because they are unaware of programs or don't have capacity to write award-winning grants
- Direct more funds toward nutrition. Largest education bill passed in Mississippi and no additional funds for nutrition programs

## Policy

- Increase community access to school facilities for physical activity and nutrition education
- Need to develop contingency plan in the event that CHIPS (Children's Health Insurance Program) funding ends or is reduced—higher obesity rates occur among children without insurance
- Need to provide more exposure of the policies that are being proposed and passed. Parents need this information so that they can support these efforts

## Accountability

- Must have some kind of quality assurance in place so that outcomes are measured, evaluation is conducted, and evidence-based practices, principles and programs are being utilized
- Establish stronger performance standards and incentives for schools to adhere to physical education requirements, while limiting exemptions from physical education participation

## **Collaboration**

- Need to fund coalitions and partners so that efforts won't be duplicated or fragmented
- Need to facilitate collaboration between the Departments of Education and Agriculture to develop a farm-to-school program to ensure the availability of fresh fruits and vegetables for students, which has proven to be effective in other states



# REFERENCES

---

1. Prevalence of Overweight among Children: United States, 2003-2004. National Center for Health Statistics. [www.cdc.gov/nchs/products/pubs/pubd/hestats/overweight/overght\\_child\\_03.htm](http://www.cdc.gov/nchs/products/pubs/pubd/hestats/overweight/overght_child_03.htm).
2. Stevenson, G.D., Matich, R. Obesity among Mississippi's Children. Mississippi Health Policy Research Center. Health Policy Brief, January 2004.
3. Kolbo, J.R., Penman, A.D., Meyer, M.K., Speed, N.M., Molaison, E.F., Zhang, L. Prevalence of overweight among elementary and middle school students in Mississippi compared with prevalence data from the Youth Risk Behavior Surveillance System. Preventing Chronic Disease. Vol. 3: No. 3. July 2006. Downloaded August 20, 2007. Available from: URL: <http://www.cdc.gov/pcd/issues/2006/jul/05-0150.htm>.
4. Kolbo, J.R., Harbaugh, B., Anderson-Lewis, C., Zhang, L., Lee, J., Sasser, T., What Do Mississippians Think about Childhood Obesity? MS Public Perception of Childhood Obesity Survey, The Center for Mississippi Health Policy, December 2006.

# APPENDIX A

---

## Key Informant Interview Guide

Key informant interviewers were given an orientation before making contact with key informants. It was important for this process to be conducted professionally and with accuracy. Key informant interviewers were also instructed on conducting Internet searches for Mississippi childhood obesity programs. Following is a description of the key informant orientation components, interview support materials, and protocol information.

### Orientation Components

- Overview of The Power Project and Environmental Scan process
- Mock calls to show how to ask questions
- Phone and interview etiquette
- Using the digital tape recorder
- Note-taking tips
- Procedures for following through when calls are not returned
- Handling busy key informants
- Conducting Internet searches

### Interview Support Materials

- Digital tape recorders (that can be connected to the computer for transcription)
- Key interview sheet for recording notes (included section to document date, time)

### Protocols

- Introduce yourself
- Explain the nature of the call and the purpose of the environmental scan
- Let the key informant know that you will ask a series of questions, which will take 15 to 30 minutes
- Ask if there are any questions before the interview gets started and inform key informants that they may ask questions or stop the interview at any time
- Get permission to tape the call
- Share with key informants that tapes and notes will be confidential and used only for preparation of the environmental scan
- Share that some quotes from conversations may be used in the report, but will be used anonymously

- Send key informant an email thanking them for the interview
- Send the key informant questions to informants only when requested
- Follow up with a key informant who has not returned your call. After two attempts, try an Internet search or ask for someone else within the organization who may be able to answer questions
- Never be rude or condescending to a key informant
- Destroy notes and erase tape after reports have been filed
- Keep confidential information “confidential”

# APPENDIX B

---

## Key Informant Questions

### Public Policy:

1. What are some recent key public policy developments pertaining to childhood obesity in Mississippi?
2. Are there any pending policies that will specifically address childhood obesity among low-income citizens?
3. Which public agencies are actively addressing childhood obesity in Mississippi?
4. Are any public funds being devoted to addressing childhood obesity?
5. What types of collaborative efforts are underway to address childhood obesity?
6. What are some gaps in public policy pertaining to childhood obesity prevention efforts?
7. Are we prepared to address the economic costs (present/future) associated with childhood obesity?
8. Are there any plans to address reducing food costs to purchase healthier food choices for low-income citizens?

### Schools:

1. What are some recent key policy developments in the public education system to address childhood obesity in Mississippi?
2. Are there any school-based childhood obesity programs operating in your local schools?
3. Are all necessary staff members knowledgeable of youth daily dietary guidelines?

4. Are all necessary staff members knowledgeable of the BMI (Body Mass Index)?
5. Are your local schools meeting the state requirements for physical education?
6. Are your local schools teaching physical education versus physical activity?
7. What environmental influences in your school are affecting childhood obesity?
8. Are your schools prepared to handle overweight children?
9. Are there healthy food choices in your schools vending machines?

### **Community:**

1. Are there any local programs that address childhood obesity issues in your community?
2. Who are the stakeholders or groups that can help address childhood obesity in your local community or the state?
3. What role, if any, do faith-based groups play in your community to address childhood obesity?
4. Does your community promote healthy living?
5. Does your community have parks, walking tracks, or play ground areas?
6. Do your community leaders promote healthy lifestyle choices and lead by example?
7. Are there local sporting leagues for youth in your community?

### **Public Awareness:**

1. What are some of the public awareness campaigns being conducted in Mississippi to address childhood obesity?
2. Are there any childhood obesity public awareness campaigns specifically targeting low-income communities in your area?

3. Are there any childhood obesity public awareness campaigns operating in schools in your area?
4. Are there any childhood obesity public awareness campaigns that specifically reach out to parents in your area?

### **Public Health:**

1. Which areas of Mississippi are most affected by childhood obesity?
2. What is being done in your community to increase access to health care for low-income citizens?

### **Workplace:**

1. Which businesses operate wellness programs or health promotion programs in your community?
2. How can the business sector play a role in fighting childhood obesity?
3. Do businesses in your community donate to health-related causes?
4. Do businesses in your community sponsor health-related events such as walks or runs?
5. Are incentives given to employees that participate in wellness programs?

### Key Informant Contact List

	Name	Organization	Address	Contact Info
<b>State Agencies</b>	<b>Shane McNeill</b> Director, Office of Coordinated School Health	MS Dept of Education,	Central High School, Suite 230 P.O. Box 771, Jackson, MS 39205-0771	601-359-1737
	<b>Dr. Victor D. Sutton</b> Director Office of Preventive Health	MS Department of Health Office of Preventive Health	570 E Woodrow Wilson, P.O. Box 1700 Jackson, MS 39215	601-576-7781
	<b>Amanda Mills</b> No Child Left Inside	MS Wildlife, Fisheries and Parks	1505 Eastover Drive Jackson, MS 39211-6374	601-432-2400
	<b>Christine Philley</b> Office of Healthy Schools	MS Department of Education Central High School, Ste. 230	P.O. Box 771 Jackson, MS 39205-0771	601-359-1737
	<b>Doris J. Schneider, MS, RD,</b> Director Chair, MS Action of Kids, Division of Training, Office of Child Nutrition of Programs	MS Department of Education	P.O. Box 771 Jackson, MS 39205-0771	601-354-7556
	<b>Cookie Leffler</b> Safe Routes to School	MS Department of Transportation	401 Northwest Street Jackson, MS 39201	601-359-1454
	<b>Candice Whitfield</b> Health Policy Advisor	Office of the Governor	P.O. Box 139 Jackson, MS 39205	601-359-3100
<b>Government</b>	<b>Ms. Lollie Faye Stewart</b> Office Manager	Mississippi PTA	120 North Congress Street Jackson, MS 39201	601-352-7383
<b>Parent Organizations</b>	<b>Joyce Yates, Ed.D. CHES</b> Coordinator of Graduate Studies in Health Education	MS University for Women	1100 College Street, Columbus, MS 39701	662-329-7225
	<b>Dr. Deborah Little</b> Associate Professor Food Nutrition Program Director	MS State University Cooperative Extension Service	P.O.B. 9611 Mississippi State, MS 39762	662-325-1503
	<b>Dr. Beverly Hill</b> State Program Leader Family and Consumer Sciences	MS State University Cooperative Extension Service	P.O. Box 9601 Mississippi State, MS 39762	662-325-3032
	<b>Edith Butler</b> Expanded Food and Nutrition Education Coordinator (EFNEP)	MSU Cooperative Extension Service	P.O. Box 9611 Mississippi State, MS 39762	662-325-3462
	<b>Dr. Sylvia Byrd</b> Associate Professor	MSU Extension Service	Herzer Building, Room 251 Mississippi State, MS 39762	662-325-0919
	<b>Dr. Jerome Kolbo</b> Associate Professor	University of Southern Mississippi, College of Health and Human Sciences	118 College Drive, #5114 Hattiesburg, MS 39046-0001	601-266-5913
	<b>Dr. Kathy Yadrick, RD</b> Professor of Nutrition and Food Systems	USM College of Health and Human Sciences	118 College Drive, #5114 Hattiesburg, MS 39046-0001	601-266-4479
<b>Colleges and Universities</b>				

<b>Schools (K-12)</b>	<b>Carolyn Whitehead</b> Health and Physical Education Coordinator	McComb School District	695 Minnesota Avenue McComb, Mississippi 39648	601-684-4661
	<b>Nita Thompson</b> Director	Mississippi Head Start Association	921 North Congress Street, Jackson, MS 39202	601-969-6979
	<b>Brenda Ellis</b> Elementary Education Curriculum Coordinator	Federal State Programs Cleveland School District	305 Merritt Drive Cleveland, MS 38732	662-846-6152
	<b>Louise Smith</b>	Poplarville Special Municipal Separate School District	804 South Julia Street Poplarville, MS 39470	601-795-8477
	<b>David Derrick</b> Executive Director	Mississippi Private Schools Association	176 County Place Parkway Pearl, MS 39208	601-932-2007
	<b>Betty Bell</b> Federal State Programs	Natchez Adams School District	P.O. Box 1188 Natchez, MS 39121	601-656-5251
	<b>Sherry Tubby</b> Substance Abuse Prevention Coordinator	Mississippi Band of Choctaw Indians Division of Schools	P.O. Box 6008 Choctaw, MS 39350	601-650-7302
	<b>Gail Kavanaugh</b> Child Nutrition Program Director	Vicksburg/Warren School District	Vicksburg, MS 39180	601-631-2828
<b>Community-based Organizations</b>	<b>Dr. Samuel Okoye</b>	Community Outreach for Health Awareness	1850 Chadwick Drive, Jackson, MS 39209	601-373-1492
	<b>Carol Burger</b>	Black Women's Health Initiative	843 North President Street Jackson, MS 39202	601-948-4725
	<b>Melinda Todd, MPH, CHES, CPS</b>	Unity Health Services Health Education and Health Promotion	5255 Keele Street, Suite D Jackson, MS 39206	601-366-2000
	<b>Beneta Burt</b> Executive Director	Jackson Road Map Lean Back Project	350 West Woodrow Wilson Drive, Jackson Medical Mall Jackson, MS 39213	601-987-6783
	<b>Sara Gentry</b> Past Executive Director	MS 2020 Network, Inc.	350 W. Woodrow Wilson Ave., Jackson 39213	601-981-9992
	<b>AnnaLyn Whit</b>	Delta Health Alliance	P.O. Box 277 Stoneville, MS 38776	662-686-3520
	<b>Desiree Dillon</b> Director of Agency Relations	MS Food Network	P.O. Box 411 Jackson, MS 39205	601-353-7286
<b>Foundations</b>	<b>Wade Overstreet</b> Director	Blue Cross Blue Shield of Mississippi Foundation	P.O. Box 1043 Jackson, MS 39215-1043	601-664-4707
	<b>John Sturdivant</b> CFO	The John D. Bower Foundation	578 Highland Colony Parkway, Ste. 120, Ridgeland, MS 39157	601-607-3163
	<b>Tom Pittman</b> President	Community Foundation of Northwest Mississippi	321 Loshier Street Hernando, MS 38632	662-449-5002
<b>National Organizations</b>	<b>Vivica Kraak</b>	Save the Children	2000 M Street, NW Ste 500 Washington, DC 20036	601-203-4170
<b>State and Local Associations</b>	<b>Dr. Marilyn Beach</b> Executive Director	MASH	P.O. Box 4570 Jackson, MS 39296	601-506-0148
	<b>Mary Fortune</b>	The Diabetes Foundation of MS	16 Northtown Drive, Suite 100, Jackson, MS 39211	601-957-7878
	<b>Elana Jackson</b>	American Heart Association	4830 McWillie Circle Jackson, MS 39206	601-321-1200
	<b>Stephanie Willis</b>	American Diabetes Association	200 Office Park Dr., Suite 303 Birmingham, Alabama 35223	800-676-4065 ext. 3079



<b>Youth-Serving Organizations</b>	<i>Twila Vantrese</i>	Middle MS Girl Scout Council	1471 West County Line Road, Jackson, MS 39213	601-366-0607
	<i>Tiffany Grey</i>	Boys and Girls Club of Jackson	1450 W. Capitol Street, Jackson, MS 39207-3194	601-969-7088
	<i>David Reeves</i> CEO	Jackson YMCA	800 East River Place Jackson, MS 39202	601-948-0818, ext. 203
<b>Health Care Organizations</b>	<i>Dr. Jasmine Chapman</i> CEO	Jackson-Hinds Comprehensive Center	P.O. Box 3437 Jackson, MS 39207	601-362-5321
	<i>Tony Dorsey</i>	Forrest General Hospital	2255 Broadway Drive Hattiesburg, MS 39042	601-288-4720
	<i>Darcel Thigpen</i> Outreach Worker	Jackson Heart Study Coordinating Center	350 Woodrow Wilson Drive, Ste. 701 Jackson, MS 39213	601-979-8700
<b>Public Health Advocates</b>	<i>Ellen Jones</i> Health Consultant	Independent Consultant	115 Coventry Cove Madison, MS 39110	601-540-6310
	<i>Therese Hanna</i> Executive Director	Center for Mississippi Health Policy	Plaza Bldg. Ste 700 120 North Congress St. Jackson, MS 39201	601-709-2133
	<i>Roy Mitchell</i>	MS Health Advocacy Program	P. O. Box 11837 Jackson, MS 39283-1837	601-982-2990
<b>Physicians</b>	<i>Ed Hill, M.D.</i> Board Member	Past President of AMA, MDH	2860 South Green Street, Tupelo, MS 38801	601-791-2261
<b>Population-Specific</b>	<i>Vickie Singletary</i> Director of Nursing Choctaw Health Services	Mississippi Band of Choctaw Indians	P.O. Box 6010 Philadelphia, MS 39350	601-389-6261
	<i>Terri Jackson</i> Health Coordinator Division of Early Childhood	Mississippi Band of Choctaw Indians	101 Industrial Road Choctaw, MS 39350	601-656-5251
<b>Municipalities</b>	<i>Dayton E. Whites, M. D.</i> Mayor	City of Lucedale	5126 Main Street Lucedale, MS 39452	601-947-2082
	<i>Ray Holloway</i> Director	Clinton Parks and Recreation Department	200 Soccer Row Clinton, MS 39056	601-924-6082
<b>Military</b>	<i>Jami Drane</i> Family Support Programs	MS National Guard	1410 Riverside Drive Jackson, MS 39202	601-313-6765

For more information pertaining to this environmental scan, please contact the Office of Preventive Health, Mississippi Department of Health at 1.866.HLTHY4U.